

County: Sheboygan  
 GREENDALE HLTH & REHAB CENTER  
 3129 MICHIGAN AVE

Facility ID: 9370

Page 1

SHEBOYGAN 53081 Phone:(920) 458-1155  
 Operated from 1/1 To 12/31 Days of Operation: 366  
 Operate in Conjunction with Hospital? No  
 Number of Beds Set Up and Staffed (12/31/04): 64  
 Total Licensed Bed Capacity (12/31/04): 64  
 Number of Residents on 12/31/04: 59

Ownership:  
 Highest Level License: Skilled  
 Operate in Conjunction with CBRF? No  
 Title 18 (Medicare) Certified? Yes  
 Title 19 (Medicaid) Certified? Yes  
 Average Daily Census: 58

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/04)				Length of Stay (12/31/04)	
		Primary Diagnosis	%	Age Groups	%	Less Than 1 Year	%
Home Health Care	No	Developmental Disabilities	0.0	Under 65	5.1	1 - 4 Years	47.5
Supp. Home Care-Personal Care	No	Mental Illness (Org./Psy)	3.4	65 - 74	5.1	More Than 4 Years	15.3
Supp. Home Care-Household Services	No	Mental Illness (Other)	5.1	75 - 84	23.7		100.0
Day Services	No	Alcohol & Other Drug Abuse	0.0	85 - 94	55.9	*****	
Respite Care	Yes	Para-, Quadra-, Hemiplegic	0.0	95 & Over	10.2	Full-Time Equivalent	
Adult Day Care	Yes	Cancer	1.7			Nursing Staff per 100 Residents	
Adult Day Health Care	No	Fractures	16.9		100.0	(12/31/04)	
Congregate Meals	No	Cardiovascular	13.6	65 & Over	94.9		
Home Delivered Meals	No	Cerebrovascular	11.9			RNs	10.8
Other Meals	No	Diabetes	3.4	Gender	%	LPNs	7.2
Transportation	No	Respiratory	10.2			Nursing Assistants,	
Referral Service	No	Other Medical Conditions	33.9	Male	32.2	Aides, & Orderlies	
Other Services	No			Female	67.8	32.6	
Provide Day Programming for Mentally Ill	No						
Provide Day Programming for Developmentally Disabled	No		100.0		100.0		

Method of Reimbursement

		Medicare (Title 18)		Medicaid (Title 19)		Other		Private Pay		Family Care		Managed Care						Total Resi- dents	% Of All
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%		
Int. Skilled Care	0	0.0	0	2	5.1	141	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	2	3.4
Skilled Care	4	100.0	201	33	84.6	121	0	0.0	0	14	93.3	167	0	0.0	0	1	100.0	264	88.1
Intermediate	---	---	---	4	10.3	101	0	0.0	0	1	6.7	167	0	0.0	0	0	0.0	5	8.5
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Personal Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Residential Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Total	4	100.0		39	100.0		0	0.0		15	100.0		0	0.0		1	100.0	59	100.0

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Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/04				
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Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total
Private Home/No Home Health	6.6	Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Number of Residents
Private Home/With Home Health	5.3	Bathing	0.0	62.7	37.3	59
Other Nursing Homes	5.3	Dressing	5.1	76.3	18.6	59
Acute Care Hospitals	76.3	Transferring	20.3	62.7	16.9	59
Psych. Hosp.-MR/DD Facilities	0.0	Toilet Use	10.2	67.8	22.0	59
Rehabilitation Hospitals	6.6	Eating	67.8	25.4	6.8	59
Other Locations	0.0	*****				
Total Number of Admissions	76	Continence		%	Special Treatments	%
Percent Discharges To:		Indwelling Or External Catheter	6.8		Receiving Respiratory Care	8.5
Private Home/No Home Health	17.3	Occ/Freq. Incontinent of Bladder	39.0		Receiving Tracheostomy Care	0.0
Private Home/With Home Health	22.7	Occ/Freq. Incontinent of Bowel	16.9		Receiving Suctioning	0.0
Other Nursing Homes	2.7				Receiving Ostomy Care	3.4
Acute Care Hospitals	14.7	Mobility			Receiving Tube Feeding	5.1
Psych. Hosp.-MR/DD Facilities	0.0	Physically Restrained	0.0		Receiving Mechanically Altered Diets	28.8
Rehabilitation Hospitals	0.0					
Other Locations	8.0	Skin Care			Other Resident Characteristics	
Deaths	34.7	With Pressure Sores	3.4		Have Advance Directives	89.8
Total Number of Discharges		With Rashes	11.9		Medications	
(Including Deaths)	75				Receiving Psychoactive Drugs	61.0

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 Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

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	This Facility %	Ownership: Proprietary Peer Group %	Ratio	Bed Size: 50-99 Peer Group %	Ratio	Licensure: Skilled Peer Group %	Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	90.6	88.5	1.02	89.0	1.02	90.5	1.00	88.8	1.02
Current Residents from In-County	94.9	80.0	1.19	81.8	1.16	82.4	1.15	77.4	1.23
Admissions from In-County, Still Residing	27.6	17.8	1.55	19.0	1.45	20.0	1.38	19.4	1.42
Admissions/Average Daily Census	131.0	184.7	0.71	161.4	0.81	156.2	0.84	146.5	0.89
Discharges/Average Daily Census	129.3	188.6	0.69	163.4	0.79	158.4	0.82	148.0	0.87
Discharges To Private Residence/Average Daily Census	51.7	86.2	0.60	78.6	0.66	72.4	0.71	66.9	0.77
Residents Receiving Skilled Care	91.5	95.3	0.96	95.5	0.96	94.7	0.97	89.9	1.02
Residents Aged 65 and Older	94.9	92.4	1.03	93.7	1.01	91.8	1.03	87.9	1.08
Title 19 (Medicaid) Funded Residents	66.1	62.9	1.05	60.6	1.09	62.7	1.06	66.1	1.00
Private Pay Funded Residents	25.4	20.3	1.25	26.1	0.97	23.3	1.09	20.6	1.24
Developmentally Disabled Residents	0.0	0.9	0.00	1.0	0.00	1.1	0.00	6.0	0.00
Mentally Ill Residents	8.5	31.7	0.27	34.4	0.25	37.3	0.23	33.6	0.25
General Medical Service Residents	33.9	21.2	1.60	22.5	1.50	20.4	1.66	21.1	1.61
Impaired ADL (Mean)	50.5	48.6	1.04	48.3	1.05	48.8	1.03	49.4	1.02
Psychological Problems	61.0	56.4	1.08	60.5	1.01	59.4	1.03	57.7	1.06
Nursing Care Required (Mean)	7.6	6.7	1.14	6.8	1.12	6.9	1.11	7.4	1.03